

7.3.1 Cover Letter to Physician Reporting Diagnosis

Baby: _____

DOB: _____

Hosp. of Birth: _____

Mother: _____

Dear Dr. _____:

The Newborn Screening Program tracks babies with positive screens through diagnosis (or rule-out) of the disorder and initiation of treatment or a treatment plan.

If referring to PMD....

On _____ (date) the _____ Newborn Screening Area Service Center reported a positive newborn screening result to you on the above referenced baby for follow-up.

If the baby is being followed by a specialist...

On _____ (date) this baby was referred to you for diagnostic evaluation, and treatment if indicated.

California law requires that physicians making a diagnosis of a screened-for disorder report that diagnosis to the Department of Health Services, Genetic Disease Branch.

“All physicians making an initial diagnosis of a preventable heritable disorder for which testing is required under this Group shall report such diagnosis and provide information necessary for follow-up and investigation to the Department.”

(California Code of Regulations, Title 17, Division 1, Chapter 4, Subchapter 9, Group 3, Article 2, Section 6506.12)

If the baby is being followed at a center that is on SIS:

When you have diagnosed or ruled out the disorder in question, please enter the information in the MSR/CFSR/ESR.

For all other babies:

A Reporting Form for Confirmation or Rule-out of a Screened-for Disorder is enclosed to make the reporting of the outcome of this case easier for you. As soon as you have confirmed or ruled out the disorder in question, please complete this form, attaching the checked documents, and return it to me.

Thank you for your assistance with this very important reporting process for the California Newborn Screening Program.

Sincerely,

ASC Coordinator
(address)